CLAIM OF **BENEFICIAL USE** for Transfer with Multiple Changes – Surface Water and

Groundwater



Oregon Water Resources Department 725 Summer Street NE, Suite A Salem, Oregon 97301-1266 (503) 986-0900 www.oregon.gov/OWRD

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A fee of \$230 must accompany this form for any Transfer final orders including a water right with a priority date of July 9, 1987, or later. Example – A transfer involves 5 rights and one of the rights has a priority date of July 9, 1987, or later, the fee is required.

A separate form shall be completed for each transfer.

This form is subject to revision. Begin each new claim by checking for a new version of this form at: https://www.oregon.gov/OWRD/Forms/Pages/default.aspx The completion of this form is required by OAR 690-014-0100(1) and 690-014-0110(4).

Please type or print in dark ink. If this form is found to contain errors or omissions, it may be returned to you. Every item must have a response. If any requested information does not apply to the claim, insert "NA." Do not delete or alter any section of this form unless directed by the form. The Department may require the submittal of additional information from any water user or authorized agent.

"Section 7" of this form is intended to aid in the completion of this form and should not be submitted.

A claim of beneficial use includes both this report and a map. If the map is being mailed separately from this form, please include a note with this form indicating such.

If you have questions regarding the completion of this form, please call 503-979-9103.

The Department has a program that allows it to enter into a voluntary agreement with an applicant for expedited services. Under such an agreement, the applicant pays the cost to hire additional staff that would not otherwise be available. This program means a certificate may be issued in about a month. For more information on this program see:

https://www.oregon.gov/OWRD/programs/WaterRights/RA/Pages/default.aspx

SECTION 1

GENERAL INFORMATION

Type of Authorized Change

This Claim is being submitted for a transfer involving multiple changes. Mark all that apply:

- 1. 🔀 Change in POD(s) or Additional POD(s) 4. 🔄 Change in Character of Use
- 2. Change in POA(s) or Additional POA(s) 5. Change in Character of Use Reservoir
- 3. 🔀 Change in Place of Use

A separate section will be completed for each type of change authorized in the transfer final order.

YES

1. File Information

APPLICATION # T-13395

2. Property Owner (current owner information)

APPLICANT/BUSINESS NAME Dunbar Silvies River Rai		PHONE NO 907-441-	
Address 9622 Victor Rd			
CITY Anchorage	State AK	ZIP 99515	E-MAIL mindyrockeyddllc@ak.net

If the current property owner is not the transfer holder of record, it is recommended that an assignment be filed with the Department. <u>Each</u> transfer holder of record must sign this form.

3. Transfer holder of record (this may, or may not, be the current property owner)

TRANSFER HOLDER OF RECORD		
Same as above		
Address		
Сіту	STATE	Zip

4. Date of Site Inspection:

8/1/2024

5. Person(s) interviewed and description of their association with the project:

NAME	DATE	Association with the Project	
Andy Root	11/12/2019	Farm Manager	
Matt Nonenmacher	8/1/2024	Pump Setter	

6. County:

Harney

7. If any property described in the place of use of the transfer final order is excluded from this report, identify the owner of record for that property (ORS 537.230(5)):

Owner of Record			
Address		Name Processing	
Сітү	STATE	ZIP	

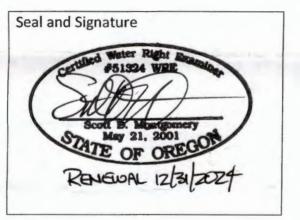
Add additional tables for owners of record as needed



SECTION 2 SIGNATURES

CWRE Statement, Seal and Signature

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge.



CWRE NAME Scott D Montgomery		Рноме No 541-548-		Additional Contact No. 541-420-0401
Address PO Box 767				
Спу Terrebonne	STATE OR	ZIP 97760	E-MAIL scott@apea	ands.com

Transfer Holder of Record Signature or Acknowledgement

Each transfer holder of record must sign this form in the space provided below.

The facts contained in this Claim of Beneficial Use are true and correct to the best of my knowledge. I request that the Department issue a water right certificate.

Signature	PRINT OR TYPE NAME	TITLE	DATE
22 10	William J. Dunbar	Managing Member	abuhozy

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SECTION 3

Changes Made

Note: The Claim <u>only</u> needs to describe the changes that were authorized in the transfer final order.

Change #1

New or Additional Point of Diversion

Change in POD(s) or Additional POD(s)

Did the transfer order authorize a change in the points of diversion or additional points of

diversion?

YES

NO

1. New or additional point of diversion name or number:

POD 4	Poison Slough a tributary of Poison Creek	
(CORRESPOND TO MAP)		
(POD) NAME OR NUMBER		
POINT OF DIVERSION	Source	

2. Variations:

Was the use developed differently from what was authorized by the transfer final order, or extension final?

If yes, describe below.

(e.g. "The order allowed three new/additional points of diversion. The water user only developed one of the points.")

3. Claim Summary:

POD 4	2.0 cfs	10.69 cfs	Dry
NAME OR #			
POD	IN ORDER	BASED ON SYSTEM	MEASURED
ADDITIONAL	AUTHORIZED	THEORETICAL RATE	WATER
NEW OR	MAXIMUM RATE	CALCULATED	AMOUNT OF

System Description

Are there multiple new or additional Points of Diversion (POD)?

NO

POD Name or Number this section describes (only needed if there is more than one):

POD 4	
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A. POD System Information

Provide the following information concerning the point of diversion. Information provided must describe the equipment used to appropriate water from the point of diversion.

1. Pump Information NO PUMP OR MOTOR

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
None					

2. Motor Information

MANUFACTURER	HORSEPOWER
None	

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP	LIFT FROM PUMP TO	
			PLACE OF USE	OUTPUT (IN CFS)
NA		1. ¹ 2 ¹ · · · · Είτι · · · · · · · · · · · · · · · · · · ·		

4. Provide pump calculations:

NA			

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT
		OBSERVED	(IN CFS)
NA			

Reminder: For pump calculations use the reference information at the end of this document.

B. Gravity Flow Pipe

(THE DEPARTMENT TYPICALLY USES THE HAZEN-WILLIAM'S FORMULA FOR A GRAVITY FLOW PIPE SYSTEM)

1. Does the diversion involve a gravity flow pipe?

YES

2. Complete the table:

PIPE	PIPE	"C"	AMOUNT OF	LENGTH OF PIPE	SLOPE	COMPUTED RATE OF WATER
SIZE	Туре	FACTOR	FALL			FLOW (IN CFS)
48'	CMP	100	0.3'	30LF	0.01 1/1	10.90

3. Provide calculations:

Q = 1.31 x C x R ^{0.63} x S ^{0.54} = (1.31)(100)(1) $^{0.63}$ (0.01) $^{0.5}$ R= 4/4 = 1'	Received
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4. If an actual measurement was taken, provide the following:

DATE OF MEASUREMENT	WHO MADE THE	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER	
	MEASUREMENT		(IN CFS)	
Dry	Harman ann a Màrann an Antaran ann an Airtean Ann an Airtean an Airtean an Airtean Airtean Airtean Airtean Air			

Attach measurement notes.

C. Gravity Flow Canal or Ditch

(THE DEPARTMENT TYPICALLY USES MANNING'S FORMULA FOR CANALS AND DITCHES)

1. Does the diversion involve a gravity flow ditch or canal?

YES

2. Complete the table:

Canal or Ditch Type (material)	TOP WIDTH OF CANAL OR DITCH	BOTTOM WIDTH OF CANAL OR	Depth	"N" Factor	AMOUNT OF FALL	LENGTH OF CANAL /	Slope	RATE (IN CFS)
Grass	8'	Dітсн 2'	1'	0.035	0.5'	Dітсн 100 LF	0.005 1/1	10.69

3. Provide calculations:

$Q = 1.486 \times A \times R^{2/3} \times S^{3}$	^{1/2} =(<u>1.486)(5)(0.6)^{2/3} (0.00</u>	05) ^{1/2} = 10.69 cfs	
N	0.035		
A = <u>8'+2'</u> x 1 = (5 SF)	P = 2' + 6.3' = 8.3'	R = A/P = 0.6'	
2			

4. If an actual measurement was taken, provide the following:

DATE OF MEASUREMENT	WHO MADE THE	MEASUREMENT METHOD	MEASURED QUANTITY OF WATER
	MEASUREMENT		(IN CFS)
Dry			

Attach measurement notes.

D. Additional notes or comments related to the system:



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Change #2

Change in POA(s) or Additional POA(s)

Did the transfer order authorize a change in the points of appropriation or additional points of appropriation? **YES**

1. New or additional point of appropriation name or number:

POINT OF APPROPRIATION	WELL LOG ID # FOR ALL	WELL TAG #	SOURCE
(POA) NAME OR NUMBER	WORK PERFORMED ON THE	(IF APPLICABLE)	(IF LISTED IN TRANSFER FINAL
(CORRESPOND TO MAP)	WELL (IF APPLICABLE)		Order)
#2	HARN 602	None	Poison Cr Slough (Silvies River)
#3	HARN 52832	L133823	Poison Cr Slough (Silvies River)
Howes	HARN 592	None	Silvies River

Attach each well log available for the well (include the log for the original well and any subsequent alterations, reconstructions, or deepenings)

2. Variations:

Was the use developed differently from what	was authorized by the transfer final order,
or extension final?	,

If yes, describe below.

(e.g. "The order allowed three new/additional points of appropriation. The water user only developed one of the points.")

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NO

3. Claim Summary:

New or Additional POA NAME OR #	MAXIMUM RATE AUTHORIZED	CALCULATED THEORETICAL RATE BASED ON SYSTEM	Amount of water measured
#2	1/80 cfs/acre	1.17 cfs	Off
#3	1/80 cfs/acre	1.17 cfs	Off
Howes #2	1/80 cfs/acre	1.17 cfs	Off

System Description

Are there multiple new or additional Points of Appropriation (POA)?

YES

POA Name or Number this section describes (only needed if there is more than one):

#2 (Jacobs)

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
National	N230	UNK	Turbine	14"	8″

2. Motor Information

MANUFACTURER	Horsepower
US Electric	40

3. Theoretical Pump Capacity

HORSEPOWER	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
40	40	140'0	0'	1.17

4. Provide pump calculations:

Q = 7.04 ft 4/4/hp x hp	= <u>(7.04)(40)</u> = 1.17	
Total head, ft	241.6	
Total head = 101.6' + 14	0' + 0' = 241.6'	

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME OBSERVED	TOTAL PUMP OUTPUT (IN CFS)
Not running			· · ·

Reminder: For pump calculations use the reference information at the end of this document. Received

B. Groundwater Source Information (Well and Sump)

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C. Additional notes or comments related to the system:

POA Name or Number this section describes (only needed if there is more than one):

#3 (APOA)		

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	MODEL	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR	INTAKE SIZE	DISCHARGE
			SUBMERSIBLE)		SIZE
Gould	UNK	161214	Turbine	12"	8"

2. Motor Information

Winder(0):1432	FIELESSPONTES
GE	40

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)
40	40	140'	0'	1.17

4. Provide pump calculations:

Q = 7.04 ft 4/5/hp x h	a = (7.04)(40) = 1.17 cfs	
Total head, ft	241.6	
Total head = 101.6' + 1	.40' + 0' = 241.6'	

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT
		OBSERVED	(IN CFS)
Not running			

Reminder: For pump calculations use the reference information at the end of this document.

B. Groundwater Source Information (Well and Sump)

Is the appropriation from a dug well (sump)?



NO

NO

C. Additional notes or comments related to the system:

POA Name or Number this section describes (only needed if there is more than one):

Howes (Howes #2)

A. POA System Information

Provide the following information concerning the point of appropriation. Information provided must describe the equipment used to appropriate water from the point of appropriation.

1. Pump Information

MANUFACTURER	Model	SERIAL NUMBER	TYPE (CENTRIFUGAL, TURBINE OR SUBMERSIBLE)	INTAKE SIZE	DISCHARGE SIZE
Johnston	UNK	UNK	Turbine	12"	8″

2. Motor Information

when the main sound is	Fightering
GE	30

3. Theoretical Pump Capacity

Horsepower	OPERATING PSI	LIFT FROM SOURCE TO PUMP *IF A WELL, THE WATER LEVEL DURING PUMPING	LIFT FROM PUMP TO PLACE OF USE	TOTAL PUMP OUTPUT (IN CFS)	
30	30	100'	5'	1.17	

4. Provide pump calculations:

```
Q = 7.04 \text{ ft } 4/5/\text{hp x hp} = (7.04)(30) = 1.17 \text{ cfs}
Total head, ft 181.2
Total head = 76.2' + 100' + 5' = 181.2'
```

5. Measured Pump Capacity (using meter if meter was present and system was operating)

INITIAL METER READING	ENDING METER READING	DURATION OF TIME	TOTAL PUMP OUTPUT	
		OBSERVED	(IN CFS)	
Not running				

Reminder: For pump calculations use the reference information at the end of this document.

B. Groundwater Source Information (Well and Sump)

 1. Is the appropriation from a dug well (sump)?
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 NO

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C. Additional notes or comments related to the system:

Change #3

Change in Place of Use

Did the transfer order authorize a change in the place of use?

1. Claim Summary – Authorized Use:

If Irrigation or Nursery Use:

If the new use(s) was not irrigation or nursery:

New Use(s)	WAS THE NEW PLACE OF USE DEVELOPED TO THE FULL EXTENT AUTHORIZED UNDER THE ORDER?	
	(INCLUDE THE LOCATION OF THE DEVELOPED PLACE USE ON THE CLAIM MAP)	
	NA	
	NA	

2. Variations:

Was the use developed differently from what was authorized by the transfer final order? **NO** If yes, describe below.

(e.g. "The order authorized a change in place of use for 40 acres. The water user only developed 38 acres.")

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YES

Change #4

Change in Character of Use

Did the transfer order authorize a change in character of use?

Change #5

Change in Character of Use – Reservoir

Did the transfer order authorize a change in character of use for a reservoir?

NO

NO

SECTION 4

CONDITIONS

All conditions contained in the transfer final order, or any extension final order shall be addressed. Reports that do not address all performance related conditions will be returned.

1. Time Limits:

1

Describe how the water user has complied with each of the development timelines established in the transfer final order and any extensions of time issued for the transfer:

	DATE FROM TRANSFER	DATE THE AUTHORIZED CHANGES WERE COMPLETED *THIS DATE MUST FALL BETWEEN THE "ISSUANCE DATE" AND THE "COMPLETENESS DATE"		
ISSUANCE DATE	01/03/2022			
COMPLETENESS DATE FROM ORDER (C)	10/1/2023	Spring 2022		

* MUST BE WITHIN PERIOD BETWEEN TRANSFER FINAL ORDER, OR ANY EXTENSION FINAL ORDER ISSUANCE AND THE DATE TO COMPLETE THE CHANGE

2. Is there an extension final order(s)?

3. Measurement Conditions:

a. Does the transfer final order, or any extension final order require the installation YES

of a meter or other approved measuring device?

If "NO", items b through f relating to this section may be deleted.

Reminder: If a meter or approved measuring device was required, the COBU map must indicate the location of the device in relation to the point of appropriation.

b. Has a meter been installed?

Received

NO

YES NO

c. Meter Information

POD/POA Name or #	MANUFACTURER	SERIAL #	CONDITION (WORKING OR NOT)	CURRENT METER READING	DATE INSTALLED
#2	Seametrics	10232615	Not running	0 AF	Spring 2022*
#3	Lindsay Growsmart	GT18061040	Not running	145961.8 galx1000	Fall 2019
Howes Well	Seametrics	05241777	Not running	0 AF	Spring 2022*

*Replacement flowmeters (installed September 2024)

d. If a meter has not been installed, has a suitable measuring device been installed and approved by the Department?

e. If "YES", provide a copy of the letter approving the device, if available. If the letter is not available provide the name and title of the Water Resources Department employee approving the measuring device, and the approximate date of the approval:

NAME	TITLE	APPROXIMATE DATE

f. Measurement Device Description

DEVICE DESCRIPTION	CONDITION	DATE INSTALLED
	(WORKING OR NOT)	

4. Recording and reporting conditions

a. Is the water user required to report the water use to the Departme	ent? NO
5. Fish Screening	
a. Are any points of diversion required to be screened to prevent fish	from entering the point of
diversion?	NO

6. By-pass Devices

a. Are any points of diversion required to have a by-pass device to prevent fish from entering the point of diversion? **NO**

7. Other conditions required by the transfer final order or extension final order:

comp	bly with the condition(s):		
If "YE	S" to any of the above, identify the condition and describe the water	user's actions ted	
c.	. Other conditions?	r	O
b.	. Was submittal of a ground water monitoring plan required?	r	O
a.	. Were there special well construction standards?	r	O

SECTION 5

ATTACHMENTS

Provide a list of any additional documents you are attaching to this report:

ATTACHMENT NAME	DESCRIPTION	
Well logs	HARN 602, 52832 & 592	
Site photos	Time, location stamped pictures of POD, POAs & POU	

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SECTION 6

CLAIM OF BENEFICIAL USE MAP

The Claim of Beneficial Use Map must be submitted with this claim. Claims submitted without the Claim of Beneficial Use map will be returned. The map shall be submitted on polyester film at a scale of 1'' = 1320 feet, 1'' = 400 feet, or the original full-size scale of the county assessor map for the location.

The changes that were authorized under the transfer final order must be mapped based on the developed locations; new or additional points of appropriation and place of use.

In cases where the order involved additional points of appropriation, the additional points should be mapped based on their developed locations. The original points of appropriation should be mapped based on the original right of record at the time the transfer final order was issued.

In cases where the order involved changing the place of use for a portion of a water right, the portion of the place of use being changed should be mapped based on the developed location. If the transfer also included portions of the place of use that were not being modified, but were receiving a new or additional point of appropriation, the place of use for those lands should be mapped based on the original right of record at the time the transfer final order was issued.

Provide a general description of the survey method used to prepare the map. Examples of possible methods include, but are not limited to, a traverse survey, GPS, or the use of aerial photos. If the basis of the survey is an aerial photo, provide the source, date, series and the aerial photo identification number.

The POD/POAs, conveyances, and application to irrigate the place of use were tied using a Topcon FC-6000 field controller. Point data was imported into Topcon Magnet Tools software and converted to Statewide Lambert Projection. Point data was overlaid & compared with aerial imagery for accuracy.

Received



Map Checklist

Please be sure that the map you submit includes ALL the items listed below. (Reminder: Incomplete maps and/or claims may be returned.)

- Map on polyester film
- Appropriate scale (1'' = 400 feet, 1'' = 1320 feet, or the original full-size scale of the county assessor map)
- Township, Range, Section, Donation Land Claims, and Government Lots
- If irrigation, number of acres irrigated within each projected Donation Land Claims, Government Lots, Quarter-Quarters
- Locations of fish screens and/or fish by-pass devices in relationship to point of diversion
- Locations of meters and/or measuring devices in relationship to point of diversion or appropriation
- Conveyance structures illustrated (pumps, reservoirs, pipelines, ditches, etc.)
 - Point(s) of diversion or appropriation (illustrated and coordinates)
- Tax lot boundaries and numbers
- Source illustrated if surface water
- Disclaimer ("This map is not intended to provide legal dimensions or locations of property ownership lines")
- Application and permit number or transfer number
 - North arrow
- 🛛 Legend

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CWRE stamp and signature

Received

ORIGINAL File Original and Duplicate with the	EIVENATER WE		32-25	F(I)
SALEM, OREGON	B 11 1959 LSTATE OF	F OREGON HARRY State Permit No	47	****
(I) OWNER.	E ENGINEER	(11) WELD TESTS: Drawdown is amount to lowered below static let	vater leve	l is
	M, OREGON	Was a pump test made? X Yes I No If yes, by whom		lowes
Address B ox 647 Burns O:	regon	Yield: 500 gal./min. with 40 ft. drawdow	n after 📕	hrs.
	Man	<u> </u>	30 day	Te "
(2) LOCATION OF WELL:		19 55 61 	90 .	10 12:15 N 17.55
County Harney Owner's nu	imber, if any_No. 2	Bailer test gal./min. with ft, drawdown	n after	hrs.
34 N.W 34 Section 27 T.	23 _R 32 _{W.M.}	Artesian flow g.p.m. Date		
Bearing and distance from section or subdivis	ion corner	Temperature of water 40 Was a chemical analysis ma	de? 🛛 Y	es K No
Well No.2 1370 S. I	485 E. from	(12) WELL LOG: Diameter of well	T2	inches.
N.W. corner of 1		Depth drilled TOO ft. Depth of completed w		
		Formation: Describe by color, character, size of materia show thickness of aquifers and the kind and nature of stratum penetrated, with at least one entry for each c	l and stru	cture, and
	A 100 ATLAN AND AND AND AND AND AND AND AND AND A	stratum penetrated, with at least one entry for each c	hange of	formation.
		MATERIAL	FROM	TO
TYPE OF WORK (check):		Top soil	0	8 Ft
	nditioning 🗌 Abandon 🗌	sand (brown)	8	20 "
If abandonment, describe material and proceed	ure in Item 11.	blue clay	20	47
(4) PROPOSED USE (check):	(5) TYPE OF WELL:	blue sand & gravel blue clay & sand down to	41	60
menestic [Industrial] Municipal	Rotary Driven	100 ft. with a little		
	Cable [] Jetted [] Dug [] Bored K	water.		pr-
sation Test Well Other				
(6) CASING INSTALLED: THE	Welded 50 1b.	to 04		
12 " Diam. from top ft. to	ft. Gage 20 1D.	to ft.		
		60 to I00 ft. not cased		
" Diam. from ft. to	ft. Gage			
(7) PERFORATIONS: Pe	rforated? 🗌 Yes 🔭 No	and the second		1
Type of perforator used				
SIZE of perforations in. by	in.			
perforations from	ft. to ft.			
perforations from		Deschool		- B *
perforations from		Heceiven		
perforations from		207 1 0 2024		
perforations from	ft. to ft.	110 2021		
(8) SCREENS: Well screen i	installed 🗌 Yes 🖾 No			
afacturer's Name		OWHD		
Туре 7				
Diam Slot size Set from	ft. to ft.			1 11
Diam Slot size Set from	ft. to ft.	Work started May Ist 156. Completed Ju	ne la	1t 19 50
CONSTRUCTION:		(13) PUMP:		
was well gravel packed? [] Yes 🖥 No Size	e of gravel:	Manufacturer's Name Kimball Turbin Pu	mp Cc	
Gravel placed from ft. to	ft.	Type: D.F. Ser, 2720	-	
Was a surface seal provided? 🗋 Yes 📋 No	To what depth? ft.			
Material used in seal-		Well Driller's Statement:		
Did any strata contain unusable water?		This well was drilled under my jurisdiction a	nd this	report is
Type of water? Depth of Method of sealing strata off	strata	true to the best of my knowledge and belief.		
,	and the second sec	NAME Wayne Howes (Person, firm, cr corporation) (Ty	pe or prin	*)
(10) WATER LEVELS:				
Static level IO & 50 ft. below land		Address Box 647 Burns Oregon		
Artesian pressure 1bs. per squ	are inch Date	Driller's well number		
Log Accepted by:	0	[Signed] Wayne Howes		
[Signed] Warme How Par	June 1 1956	(Nell Driller)	. 1	51
(Owner)		License No Date Jun	-01	, 19.90
	(USE ADDITIONAL SH	CETS IF NECESSARY)		

		* .	ten =	
the Original and irst Copy with the TATE ENGINEER, ALEM, OREGON	VATER WELL REPORT STATE OF OREGON	41.11	23/32- Well No.	*
1) OWNER: ame L.L. Jacobs	(11) WELL Was a pump test	TESTS: Drawn lower	down is amount water ed below static level o If yes, by whom? ~	
Idress Burns Orcyon	Yield: ////	gal./min. with	ft. drawdown aft	er hrs.
SW 14 NE 14 Section 28 T. 235 R.	# 2 Bailer test 32 E.W.M. Temperature of		" ft. drawdown aft .m. Date mical analysis made?	
aring and distance from section or subdivision corner 235515 and 166 from NE Car & section	(12) WELL 28 Depth drilled Formation: Des show thickness	LOG: Dia	ameter of well	14 inches. 250 ft. I structure, and naterial in each
b) TYPE OF WORK (check): w Well Deepening Reconditioning abandonment, describe material and procedure in Item 11.	Abandon [] Abandon [] 0-5'	MATERIAL Mol Case Top pro	FR.	
PROPOSED USE (check): (5) TYPE O omestic Industrial Municipal rigation Test Well Other	F WELL: Driven Jetted Bored Bored Jetted Bored Jetted Jetted Bored Jetted Bored Jetted	o Alie	al and	water
b) CASING INSTALLED: Threaded [] Weld "Diam. fromft. toft. Gag "Diam. fromft. toft. Gag "Diam. fromft. toft. Gag	re	2 gran	and and	water
perforations from ft. to		238 g 50-	Place 1	way -
perforations from		ration	m60'	- 140'
) SCREENS: Well screen installed mufacturer's Name				
		19 .	Completed	19
b) CONSTRUCTION: as well gravel packed? Yes No Size of gravel: as a surface seal provided? Yes No To what depth? aterial used in seal— d any strata contain unusable water? Yes No pe of water? Depth of strata	ft. Type:	Turbine	H.P.	30 HP.
ethod of sealing strata off 10) WATER LEVELS:		(Person, firm, er corpo		. print)
the level ft. below land surface Date tesian pressure lbsper, square inch Date og Accepted by: Sobmitted by L.L. dat	Driller's well n	umber	-	-
Signed] Date	License No	*******************************		
OCT 1 0 2024	ADDITIONAL SHEETS IF NECESSAR	.Y)	here -	
OWRD				

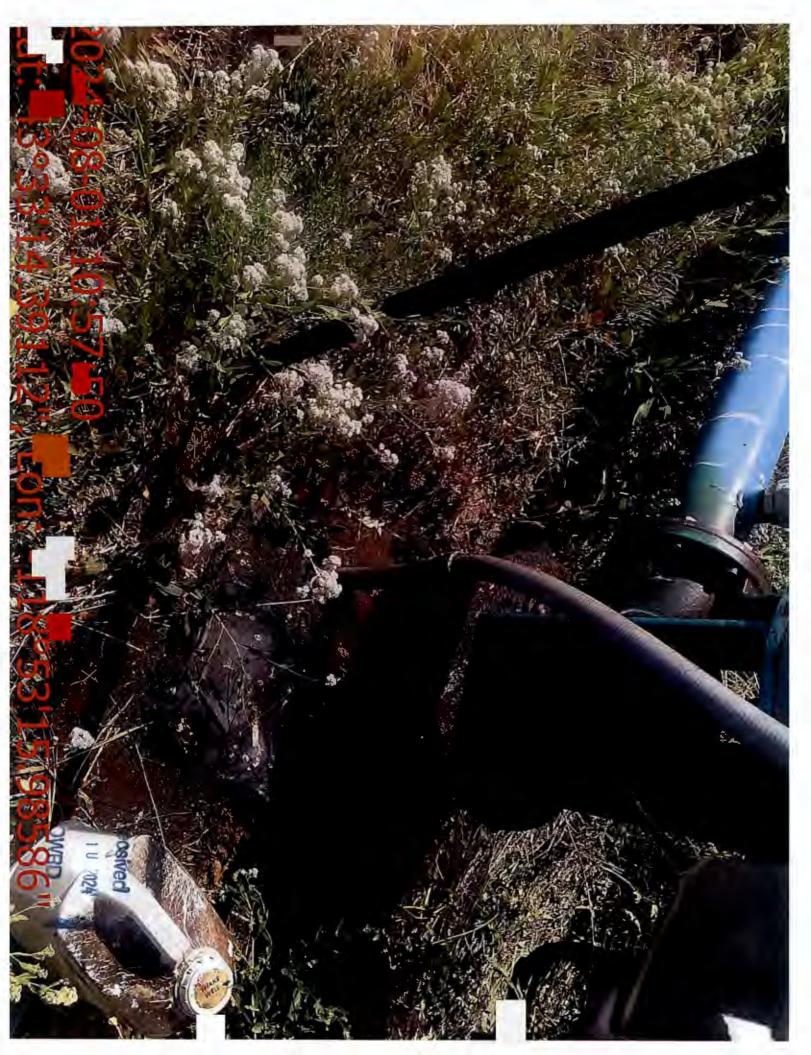
			WELL I.D. LABEI	#1		Page 1 of 1
	HARN	52832	START CARD			
WATER SUPPLY WELL REPORT (as required by ORS 537.765 & OAR 690-205-0210)	10/14/2	2019	ORIGINAL LOG	10.0	022	
(1) LAND OWNER Owner Well I.D.	10/14/2	017	ON ON ON ON ON			
First Name WILLIAM Last Name DUNBAR		(9) LOCATI	ON OF WELL (lega	al descri	ntion)	
Company	1	• /	Twp 23.00 S		-	E E/W WM
Address 11050 HIDEAWAY LAKE CIRCLE		Sec 28 N	W 1/4 of the NE	1/4	Tax Lot 470	0
City ANCHORAGE State AK Zip 99567 (2) TYPE OF WORK X New Well Deepening Conver	/	Tax Man Number	r			
(2) TYPE OF WORK X Ivew wen Deepening Conver Alteration (complete 2a & 10) Abandonment(com	ISION	Lat	* " OT			DMS or DD
(2a) PRE-ALTERATION		LOUG	10 "			DMS or DD
Dia + From To Gauge Stl Plstc Wld Thrd			et address of well	Nearest ac	ddress	
Casing: C C L L Material From To Amt sacks/lbs		34988 KYEGKA	155 LN BUKNS UK 9772	J		
Seal:	H					
(3) DRILL METHOD		(10) STATIC	WATER LEVEL	Data GI		
Rotary Air Rotary Mud Cable Auger Cable Mud		Existing We	Il / Pre-Alteration	Date SV	WL(psi) +	SWL(ft)
Reverse RotaryOther		Completed V		2019		60
(4) PROPOSED USE Domestic X Irrigation Community			Flowing Artesian?	Dr	y Hole?	
Industrial/ Commericial Livestock Dewatering	V	VATER BEARIN	G ZONES Dept	n water wa	s first found	8.00
Thermal Injection Other		SWL Date	From To	Est Flow	SWL(psi)	+ SWL(ft)
(5) BORE HOLE CONSTRUCTION Special Standard (At	ttach copy)	10/13/2019	8 28	5		8
Depth of Completed Well 248.00 ft.		10/13/2019	65 248	500		60
BORE HOLE SEAL Dia From To Material From To Am	sacks/ nt lbs					
	20 S					
12 118 248 Calculated 11	16	L				
Calculated		11) WELL L	OG Ground Elev	ation		
How was seal placed: Method A B XC D	F		Material	au011	From	То
Other		top soil	Wateria		0	5
Backfill placed from ft. to ft. Material		sand and gravel			5	28
Filter pack from ft. to ft. Material Size		grey clay sand and gravel			28 65	65 95
Explosives used: Yes Type Amount		grey clay with sa	und streaks		95	218
(5a) ABANDONMENT USING UNHYDRATED BENTONIT		broken grey clay			218	248
Proposed Amount Actual Amount						
(6) CASING/LINER						
Casing Liner Dia + From To Gauge Stl Plstc W \bigcirc 12 \boxtimes 2 118 .250 \bigcirc 2			Received			
	9 H I		11000110			
			DET 1 0 202	4		
			Mut :			
			OWRD			
Shoe Inside Outside Other Location of shoe(s)			0111-			
Temp casing Yes Dia From + To						
(7) PERFORATIONS/SCREENS Perforations Method						
Screens Type Material		Date Started9	/27/2019 C	ompleter	d 10/13/2019	
Perf/ Casing/ Screen Scrn/slot Slot # of	Tele/ pipe size	(unbonded) Wa	ter Well Constructor Ce	rtification		
Screen Liner Dia From To width length slots	pipe size	` '	e work I performed on th			ng, alteration, or
		abandonment o	f this well is in compl	iance with	n Oregon wa	ter supply well
			ndards. Materials used an nowledge and belief.	d informat	tion reported a	above are true to
		5	1739	Date	0/14/2019	
(8) WELL TESTS: Minimum testing time is 1 hour						
O Pump O Bailer O Air O Flowing Art	rtesian	Signed CHAI	RLES FRY (E-filed)			
Yield gal/min Drawdown Drill stem/Pump depth Duration (hr		(bonded) Water	Well Constructor Certi	fication		
500 200 2			bility for the construction			
			on this well during the con ing this time is in comp			
Temperature 60 °F Lab analysis Yes By		construction star	idards. This report is true	to the best	of my knowle	dge and belief.
	ppm		1355			
Water quality concerns? Yes (describe below) TDS amount 402 From To Description Amount	Units					
			IUR FRY (E-filed)			
		Contact Info (op	tional)			
	COLUMN OF ON FOR	IN A PARTY ATT A THI				

ORIGINAL - WATER RESOURCES DEPARTMENT THIS REPORT MUST BE SUBMITTED TO THE WATER RESOURCES DEPARTMENT WITHIN 30 DAYS OF COMPLETION OF WORK Form Version:

















ALL POINTS ENGINEERING & SURVEYING, INC. P.O. Box 767 Terrebonne, Oregon 97760 541-548-5833

TRANSMITTAL

To: Oregon Water Resources Dept 725 Summer St NE, Suite A Salem, OR 97301-1266 Date: 10/6/24 Attention: Certificate Section RE: COBU T-13395

[X] Prints [] Plans [] Plat [] Specifications.

Attached is a Claim of Beneficial Use & Final Proof map for T-13395, Dunbar Silvies Valley Ranch, LLC.

If you have any questions please don't hesitate to contact me.

No.	Description	
1	COBU (17 pages letter bond)	
2	COBU Maps (4 pages mylar)	
3	Well logs (3 pages letter bond)	
4	Site photos (7 pages letter bond)	

Received OCT 10 2024 OWRD